危疾全守衛 - 危疾保障・分紅壽險
Crisis XDefender - Critical Illness Protection • Participating life

富衛人壽保險（百慕達）有限公司
FWD Life Insurance Company (Bermuda) Limited

特約保險代理商
Appointed Insurance Agency

交通銀行
BANK OF COMMUNICATIONS
始於1908 您的財富管理銀行

承保公司
Underwritten by

FWD 富衛

放膽投入 出守吧
Geared to go

想冒險？先戴上頭盔是常識吧。不只是造型，更是基本而穩固的保障。就像一份全面的危疾保障，是現今生活的必需品，讓您真正放心，欣賞人生的美好。
為了給您最有力的支持，盡情冒險，富衛特別設計輕鬆而全面的危疾保障 – **危疾全守衛**（「本計劃」）。放膽投入，出守吧！

Wearing a helmet is more than just looking cool; it's a basic safety precaution that allows you to explore when you are riding a motorcycle. Just like critical illness protection. It has become a must-have in life these days for you to enjoy the things around you.
To accompany and support you to go everywhere you want, FWD brings you a comprehensive critical illness protection - **Crisis XDefender** ("the Plan").

自信滿滿　全因準備做足

無需要因突然來襲的疾病打擾心情！本計劃為您提供58種危疾的保障外，亦為59種特別疾病設下防衛網，當中包括了8種為兒童特設的疾病[1,2]，覆蓋範圍廣泛，讓您面對任何危疾仍能保持輕鬆與安心。

Higher Confidence from a Broad Coverage

In addition to coverage against 58 Crises, the Plan also covers 59 Special Diseases with 8 of them specifically for juveniles[1,2]. There's no simpler way to achieve broad coverage against critical illnesses.

指定危疾多重保障　讓您繼續馳騁

如果您就癌症、急性心肌梗塞或中風獲取了危疾權益賠償，除獲豁免本計劃之保費餘額外，在您不幸再次確診以上三種指定危疾其中一種，您更可獲得一筆相等於原有投保額110%的賠償[1,3]。

Enhanced Security from Designated Crises

If a claim for Crisis Benefit for Cancer, Heart Attack or Stroke has been made, in addition to the balance of premium payable under the Plan being waived, in the event that you are subsequently diagnosed with either Cancer, Heart Attack or Stroke, an additional 110% of Initial Sum Insured will be paid[1,3].

獲益加碼　全力撐您

如果您不幸於首15個保單年度內確認患上任何受保危疾或去世，本計劃會作出額外50%的原有投保額的賠償[4]。

Greater Reassurance from Additional Benefits

The Plan provides an extra 50% of the Initial Sum Insured to back you up if you are diagnosed with any covered Crises or pass away in the first 15 Policy Years[4].

多份關心　所以安心

有些病症需要一段較長的治療方可真正痊癒。因此，富衛特別為此為您作出援助，當首次確診急性心肌梗塞或中風而獲得危疾權益賠償，您將可每月額外得到原有投保額1%的復康權益，最長可達六個月[5]。此外，優活健康管理[6]會為您提供度身訂造的專業復康服務，助您從危疾中康復。

另外，若您確診第3組別（與心臟及血管有關，急性心肌梗塞及中風除外）的疾病，優活健康管理更會為您提供轉介服務，揀選最合適的復康計劃助您康復。而且，首次會診費用更可獲豁免（每名被保人可獲豁免一次）。

Special Care on Your Road to Recovery

Ongoing treatment may be necessary to fully recover from a critical illness. After your first confirmed diagnosis of a Heart Attack or Stroke, and the Crisis Benefit has been paid, you can get the Rehabilitation Benefit[5] of an additional 1% of the Initial Sum Insured per month for as many as 6 months. Further, the Lifestyle Management Program[6] will offer you a tailor-made professional rehabilitation program to support your recovery from the critical illness.

The LifeStyle Management Program will refer you to the best-suited rehabilitation program if you are diagnosed with an illness related to Group 3 diseases (illnesses related to Circulatory System except Heart Attack and Stroke). The initial consultation fee will also be waived (once per Insured).

保障初生小孩　讓他快樂成長

每個人也希望好好保護自己的下一代，因此在本計劃的嬰兒之特別權益下會為您的初生嬰兒加添原有投保額20%（最高為200,000港元/25,000美元）的危疾權益或身故權益[7]，保障期由嬰兒出生第 15 日起至其5歲生日，並無需繳付額外保費及對您的保障沒有任何影響。

Protection for Your Newborn

Everyone wants to protect their infants as much as they can. Under the Plan, should an infant be born to you or your spouse, your new born infant will be covered by Crisis Benefit or Death Benefit under Special Benefit for Infant[7] at no extra premium or impact your own coverage – 20% of the Initial Sum Insured of this Policy (up to HK$200,000 / US$25,000 per infant) from the attained age of 15 days until the child's 5th birthday.

身體檢查　防患未然

及早預防，永遠勝於治療。為了協助您維持健康，本計劃將於保單的第2、4、6、8及10保單週年日提供身體檢查[8]，助您確保健康。

Medical Check-up for Your Wellness

Early detection is always the better option, so to help you maintain your well-being, the Plan offers a Medical Check-up[8] on each of the 2nd, 4th, 6th, 8th and 10th Policy Anniversaries of the Plan.

健康身體　值得俾Like

如若您保持健康，本計劃會為此給您獎勵。您將可於退保時獲得相等於保證現金價值（從第3個保單週年起）及非保證特別紅利（如有）[9]的金額。

Reward for Healthy Body

When you stay healthy, the Plan will also reward you. The Plan offers you Guaranteed Cash Value from the 3rd Policy Anniversary and non-guaranteed Special Bonus (if any)[9] when you surrender the Policy.

專業服務　治病零煩惱

我們全面關注您的醫療質素。本計劃讓您尊享危疾全守衛 – 臻一優才醫護管理團隊（「臻一」）[10]服務作為您健康護衛，您只需撥打熱線，從提供專屬的專科醫療網絡團隊至安排入院，臻一皆為您處理得妥妥當當。

此外，一旦不幸確認患上任何危疾，您可獲得美國頂尖醫療機構專家的第二醫療意見[11]，通過專業可靠的醫療網路，尋求最合適的診治方法。另外，我們更提供轉介服務 – 家庭關懷服務[12]，讓您的家人也得到合適照顧，包括家居清潔、養生湯水、托兒、及寵物護理等。

Professional Services Are Around You

As part of our promise of care, the Plan also gives you access to a priority health coaching service: Crisis XDefender - THE ONEcierge One Team Health Management ("THE ONEcierge")[10]. You just simply call the hotline and THE ONEcierge provides you access to a dedicated network of specialists to assist you arrange your confinement properly.

If you are diagnosed with one of the covered Crises, FWD provides you with access to some of the highest-ranked medical institutions in the U.S. for a second medical opinion[11]. Through the service, you will have easy access to the best physicians available and receive a professional medical opinion. What's more, we also provide a referral service ("Family Care Services")[12] to help with taking care of your home. Through Family Care Services, you have immediate access to a wide range of carefully selected referral services including home-cleaning service, Chinese soup service, child care service and pet care service.

人生就要好好過，別再拖延，立即聯絡我們！
Get real. Don't lag behind. Talk to us today!

特色簡介 Plan Summary

計劃種類 Plan Type	基本計劃 Basic Plan		
保障年期 Benefit Term	至被保人100歲 To age 100 of the Insured		
投保年齡（下次生日年齡） Issue Age (Age Next Birthday)	1 - 70	1 - 60	1 - 55
保費供款年期 Premium Payment Term	10年 10 years	15年 15 years	20年 20 years
保費架構 Premium Structure	保費並非保證[13]，惟不會隨著被保人下次生日的年齡而增加 The premium is non-guaranteed[13] but it will not be increased based on the age of the Insured on his or her next birthday.		
保單貨幣 Currency	港幣 / 美元 HKD / USD		
繳付方式 Premium Payment Mode	每月 / 每半年 / 每年 Monthly / Semi-Annually / Annually		
最低原有投保額 Minimum Initial Sum Insured	120,000港元 / 15,000美元（每保單計） HK$120,000 / US$15,000 (per policy)		
最高原有投保額[14] Maximum Initial Sum Insured[14]	12,000,000港元 / 1,500,000美元（每被保人計） HK$12,000,000 / US$1,500,000 (per life)		
危疾權益[1] Crisis Benefit[1]	現有投保額 + 非保證特別紅利（如有）[9] Current Sum Insured + non-guaranteed Special Bonus (if any)[9]		
指定危疾之多重權益[1,3] Multiple Benefit for Designated Crises[1,3]	如獲危疾權益賠償的危疾為癌症、急性心肌梗塞或中風，於被保人隨後確認患上癌症、急性心肌梗塞或中風的情況下，可獲額外原有投保額110%的賠償 If the claim for Crisis Benefit for a Cancer, Heart Attack or Stroke is made, in the event the Insured is subsequently diagnosed with Cancer, Heart Attack or Stroke, an additional 110% of Initial Sum Insured will be paid		
特別疾病權益[1, 2] Special Disease Benefit[1, 2]	原有投保額之20% + 按比例之特別紅利（如有）[9] （就特定器官之原位癌或早期癌症、冠狀動脈成形術及就兒童的特別疾病，每名被保人於本計劃下所有保單之每宗賠償上限為300,000港元 / 37,500美元） Advanced payment of 20% of Initial Sum Insured + proportionate Special Bonus (if any)[9] (subject to a maximum of HK$300,000/US$37,500 per Insured of each claim under all policies of the Plan for Carcinoma-in-situ or Early Stage Malignancy of Specific Organs, Angioplasty of Coronary Artery and Special Diseases for Juvenile)		
額外50%保障權益[4] Additional 50% Coverage Benefit[4]	在保單的保障有效期間內，如被保人於第15個保單週年日前患上受保之危疾或身故，將可額外獲得原有投保額的50% Additional 50% of the Initial Sum Insured will be payable if the Insured is diagnosed with covered Crises or passes away before the 15th Policy Anniversary while the coverage of the Policy is in effect		
復康權益[5] Rehabilitation Benefit[5]	如因急性心肌梗塞或中風的危疾權益須被支付後，您將可每月額外獲取原有投保額的1%（最多為6個月） Additional 1% of the Initial Sum Insured is payable per month after Crisis Benefit for Heart Attack or Stroke is payable (up to a maximum of 6 months)		
嬰兒之特別權益[7] Special Benefit for Infant[7]	如被保人（或被保人的配偶）誕下嬰兒，該初生嬰兒將可從出生第15日起直至年滿5歲生日為止或被保人的保單終止，以較早者為準，每名初生嬰兒可獲得一次的危疾權益或身故權益之保障（原有投保額的20%，每名嬰兒在所有被保人及/或被保人的配偶於本計劃保單下之保障上限為200,000港元/25,000美元） If the Insured (or the Insured's spouse) gives birth to a child, the new-born infant shall be covered by the Crisis Benefit or Death Benefit (20% of the Initial Sum Insured of this Policy once per new-born infant and up to a per newborn infant of HK$200,000 / US$25,000 under all policies of the Insured and/or Insured's spouse of this Plan) from the attain age of 15 days until the child's 5th birthday or termination of the Policy of the Insured, whichever is earlier		

退保價值/期滿權益 Surrender Benefit / Maturity Benefit	保證現金價值 + 特別紅利（如有）[9] Guaranteed Cash Value + Special Bonus (if any)[9]
身故權益[1] Death Benefit[1]	現有投保額 + 特別紅利（如有）[9] Current Sum Insured + Special Bonus (if any)[9]
身體檢查[8] Medical Check-up[8]	如所有保費已於到期時全數繳付，身體檢查券將於第2、4、6、8及10個保單週年時派發 Medical check-up coupon will be offered on each of the 2nd, 4th , 6th, 8th and 10th Policy Anniversaries of the Plan if all premiums are paid when due
優活健康管理[6] Lifestyle Management Program[6]	服務支援 Service Program
危疾全守衛 - 臻一優才醫護管理團隊[10] Crisis XDefender – The ONEcierge One Team Health Management[10]	服務支援 Service Program
第二醫療意見[11] Second Medical Opinion[11]	服務支援 Service Program
家庭關懷服務[12] Family Care Services[12]	服務支援 Service Program
延伸寬限期權益[15] Extended Grace Period Benefit[15]	自第2個保單年度起，如保單權益人於本計劃的保費供款期期間成為父母、結婚、離婚、或非自願性失業，保單權益人便可選擇申請延伸寬限期權益，以延長繳付保單保費的寬限期[15]，最多可延長寬限期至365日，而期間仍可享有本計劃所提供的保障 Available since the 2nd Policy Year, if the Policy Owner becomes a parent, gets married or divorced, or becomes involuntarily unemployed during the Premium Payment Term of the Plan, the Policy Owner can choose to apply for the Extended Grace Period Benefit to stay protected by this Plan while enjoying an extended grace period for premium payment[15] up to 365 days

危疾全守衛受保的危疾 Crises covered in Crisis XDefender

組別一：癌症 Group 1: Cancer	- 癌症	- Cancer
組別二：與器官衰竭有關的疾病 Group 2: Illnesses related to Organ Failure	- 再生障礙性貧血 - 慢性肝病 - 末期肺病 - 暴發性肝炎 - 因輸血感染人類免疫力缺乏病毒 - 主要器官移植（肺、胰臟、肝、骨髓） - 囊腫性腎髓病 - 因職業感染人類免疫力缺乏病毒 - 有狼瘡性腎炎的系統性紅斑狼瘡	- Aplastic Anaemia - Chronic Liver Disease - End Stage Lung Disease - Fulminant Hepatitis - HIV Due to Blood Transfusion - Major Organ Transplantation (lung, pancreas, liver, bone marrow) - Medullary Cystic Disease - Occupationally Acquired HIV - Severe Systemic Lupus Erythematosus (S.L.E.) with Lupus Nephritis
組別三：與心臟及血管有關的疾病 Group 3: Illnesses related to Circulatory System	- 心肌病 - 冠狀動脈手術 - 艾森門格綜合症 - 急性心肌梗塞 - 心瓣手術 - 感染性心內膜炎 - 腎衰竭 - 主要器官移植（腎、心臟） - 原發性肺動脈高壓 - 中風 - 主動脈手術	- Cardiomyopathy - Coronary Artery Disease Surgery - Eisenmenger's Syndrome - Heart Attack - Heart Valve Surgery - Infective Endocarditis - Kidney Failure - Major Organ Transplantation (kidney, heart) - Primary Pulmonary Arterial Hypertension - Stroke - Surgery to Aorta

組別四：與神經系統有關的疾病 Group 4: Illnesses related to Nervous System	- 亞爾茲默氏病 - 植物人 - 細菌性腦（脊）膜炎 - 良性腦腫瘤 - 雙目失明 - 克雅二氏病 - 腦炎 - 失聰@ - 嚴重頭部創傷 - 運動神經元病 - 多發性硬化症 - 肌肉營養不良症 - 癱瘓 - 柏金遜症 - 脊髓灰質炎 - 延髓性逐漸癱瘓 - 進行性肌肉萎縮 - 進行性核上神經麻痺症 - 重症肌無力症	- Alzheimer's Disease - Apallic Syndrome - Bacterial Meningitis - Benign Brain Tumour - Blindness - Creutzfeld-Jacob Disease - Encephalitis - Loss of Hearing@ - Major Head Trauma - Motor Neurone Disease - Multiple Sclerosis - Muscular Dystrophy - Paralysis - Parkinson's Disease - Poliomyelitis - Progressive Bulbar Palsy - Progressive Muscular Atrophy - Progressive Supranuclear Palsy - Severe Myasthenia Gravis
組別五：其他疾病 Group 5: Other Illnesses	- 糖尿病併發症引致的腳部截除 - 慢性腎上腺功能不全 - 再發性慢性胰臟炎 - 昏迷 - 克隆氏病 - 伊波拉 - 象皮病 - 不能獨立生活 - 斷肢 - 喪失語言能力 - 嚴重灼傷 - 壞死性筋膜炎 - 嗜鉻細胞瘤 - 嚴重骨質疏鬆症* - 嚴重類風濕關節炎 - 系統性硬化 - 末期疾病 - 潰瘍性結腸炎	- Amputation of Feet due to Complication from Diabetes Mellitus - Chronic Adrenal Insufficiency - Chronic Relapsing Pancreatitis - Coma - Crohn's Disease - Ebola - Elephantiasis - Loss of Independent Existence - Loss of Limbs - Loss of Speech - Major Burns - Necrotizing Fasciitis - Pheochromocytoma - Severe Osteoporosis* - Severe Rheumatoid Arthritis - Systemic Sclerosis - Terminal Illness - Ulcerative Colitis

危疾全守衛受保的特別疾病 Special Diseases covered in Crisis XDefender

組別一：癌症^ Group 1: Cancer^	**- 特定器官之原位癌** a) 乳房 b) 子宮頸 c) 結腸及直腸 d) 輸卵管 e) 肺 f) 肝 g) 鼻咽 h) 卵巢 i) 胰臟 j) 陰莖 k) 胃及食道 l) 睾丸 m) 泌尿道（而膀胱原位癌是指包括患有Ta級別的膀胱乳頭狀癌） n) 子宮 o) 陰道 **- 特定器官之早期癌症** a) 早期慢性淋巴性白血病 b) 前列腺 c) 甲狀腺 d) 非黑色素瘤皮膚癌	**- Carcinoma-in-situ of Specific Organs** a) Breast b) Cervix Uteri c) Colon and Rectum d) Fallopian Tube e) Lung f) Liver g) Nasopharynx h) Ovary i) Pancreas j) Penis k) Stomach and Esophagus l) Testis m) Urinary Tract (for the purpose of in-situ cancers of the bladder, stage Ta of papillary carcinoma is included) n) Uterus o) Vagina **- Early Stage Malignancy of Specific Organs** a) Chronic Lymphocytic Leukaemia b) Prostate c) Thyroid d) Non Melanoma Skin Cancer

組別二：與器官衰竭有關的疾病 Group 2: Illnesses related to Organ Failure	- 急性再生障礙性貧血 - 膽道系統重建手術 - 肝臟手術 - 中度嚴重有狼瘡性腎炎的系統性紅斑狼瘡 - 皮膚移植 - 單腎切除手術 - 單肺切除手術	- Acute Aplastic Anaemia - Biliary Tract Reconstruction Surgery - Liver Surgery - Moderately Severe Systemic Lupus Erythematosus (S.L.E.) with Lupus Nephritis - Skin Transplantation - Surgical Removal of One Kidney - Surgical Removal of One Lung
組別三：與心臟及血管有關的疾病 Group 3: Illnesses related to Circulatory System	- 於頸動脈進行血管成形術 - 冠狀動脈成形術^ - 心臟起搏器或除顫器植入 - 頸動脈手術 - 早期心肌病 - 早期腎衰竭 - 植入靜脈過濾器 - 小切口冠狀動脈搭橋手術 - 主動脈微創手術 - 經皮心臟瓣膜手術 - 心包切除術 - 繼發性肺動脈高血壓	- Angioplasty for Carotid Arteries - Angioplasty of Coronary Artery^ - Cardiac pacemaker / defibrillator insertion - Carotid Artery Surgery - Early Cardiomyopathy - Early Renal Failure - Insertion of a Vena-Cava Filter - Keyhole Coronary Bypass Surgery - Minimally Invasive Surgery to Aorta - Percutaneous Valve Surgery - Pericardiectomy - Secondary Pulmonary Hypertension
組別四：與神經系統有關的疾病 Group 4: Illnesses related to Nervous System	- 植入人工耳蝸手術 - 早期肌萎縮性側索硬化症 - 早期多發性硬化症 - 早期延髓性逐漸癱瘓 - 早期進行性肌肉萎縮 - 輕症腦炎 - 單目失明 - 中度亞爾茲默氏病 - 中度細菌性腦（脊）膜炎 - 中度腦部損傷 - 中度肌肉營養不良症 - 中度癱瘓 - 中度柏金遜症 - 中度脊髓灰質炎 - 嚴重精神病 - 硬腦膜下血腫手術 - 腦下垂體腫瘤切除手術	- Cochlear Implant Surgery - Early Amyotrophic Lateral Sclerosis - Early Multiple Sclerosis - Early Progressive Bulbar Palsy - Early Progressive Muscular Atrophy - Less Severe Encephalitis - Loss of Sight in One Eye - Moderately Severe Alzheimer's Disease - Moderately Severe Bacterial Meningitis - Moderately Severe Brain Damage - Moderately Severe Muscular Dystrophy - Moderately Severe Paralysis - Moderately Severe Parkinson's Disease - Moderately Severe Poliomyelitis - Severe Psychiatric Illness - Surgery for Subdural Haematoma - Surgical Removal of Pituitary Tumour
組別五：其他疾病 Group 5: Others Illnesses	- 急性出血壞死性胰臟炎 - 因腎上腺腺瘤的腎上腺切除術 - 糖尿病併發症引致的單腳截除 - 昏迷超過48小時 - 克隆氏病（節段性腸炎） - 糖尿病視網膜病變 - 早期象皮病 - 因聲帶麻痺導致喪失說話能力 - 中度灼傷 - 中度類風濕關節炎 - 骨質疏鬆症連骨折* - 單肢斷離 - 嚴重中樞神經性睡眠窒息症或混合性睡眠窒息症	- Acute Necrohemorrhagic Pancreatitis - Adrenalectomy for Adrenal Adenoma - Amputation of One Foot due to Complication from Diabetes Mellitus - Coma for 48 hours - Crohn's Disease (Regional Enteritis) - Diabetic Retinopathy - Early Elephantiasis - Loss of Speech due to Vocal Cord Paralysis - Moderately Severe Burns - Moderately Severe Rheumatoid Arthritis - Osteoporosis with Fractures* - Severance of One Limb - Severe Central or Mixed Sleep Apnea

危疾全守衛適用於兒童（下次生日年齡1歲（15日）至18歲）受保的兒童特別疾病^
Special Diseases for Juvenile^ (age next birthday 1 (15 days) - 18) covered in Crisis XDefender

受保的兒童特別疾病 Special Diseases for Juvenile	- 自閉症 - 出血性登革熱 - 川崎病 - 成骨不全症 - 風濕熱瓣膜病變 - 嚴重哮喘 - 斯蒂爾病 - 一型糖尿病	- Autism - Dengue Haemorrhagic Fever - Kawasaki Disease - Osteogenesis Imperfecta - Rheumatic Fever with Valvular Impairment - Severe Asthma - Still's Disease - Type 1 Diabetes Mellitus

@ 被保人被診斷證實患上失聰時須達3歲 (下次生日年齡) 或以上，方可獲取此賠償。
* 嚴重骨質疏鬆症或骨質疏鬆症連骨折的賠償只會在確診時為70歲或以下 (下次生日年齡) 的被保人支付。
^ 每名被保人於本計劃下所有保單的每宗賠償之最高限額為300,000港元/37,500美元。

註 : 危疾及特別疾病權益之賠償須符合基本計劃之保單條款。有關危疾及特別疾病的詳情，請參閱保單條款內危疾及特別疾病之定義。

@ The claim for Loss of Hearing will only be paid if at the time of diagnosis the Insured is aged 3 (age next birthday) or above.
* The claim for Severe Osteoporosis and Osteoporosis with Fractures will only be paid if at the time of diagnosis the Insured is aged 70 (age next birthday) or below.
^ Subject to HK$300,000/US$37,500 per life of each claim under all policies of the Plan.

Note: Benefits relating to Crisis and Special Disease are payable according to the Basic Plan provisions. Please refer to the definition of Crises and Special Diseases in the Policy Provisions for the details of Crises and Special Diseases.

附註:

1. 只有被保人在保單簽發日或最後批准復效日 (以較遲者為準) 起首90天後出現相關疾病之首次徵狀、狀況及進行與相關疾病有關的診斷或手術，富衛人壽保險 (百慕達) 有限公司 (「富衛」) 將會支付危疾權益 / 特別疾病權益 / 指定危疾之多重權益。若疾病完全且直接因意外而非任何其他原因所致，則此首90天限制並不適用。本計劃的現有投保額將會於特別疾病權益被賠償後被相應扣減。現有投保額指保單原有投保額被任何特別疾病權益的賠償扣除後之金額，而身故權益、危疾權益、保證現金價值、將來的保費、及非保證特別紅利 (如有) 將被相應減少。如保單的危疾權益及 / 或特別疾病權益賠償總額達到原有投保額的100%，富衛將豁免本計劃之保費結餘，並由作出賠償總額達到原有投保額100%的危疾及/或特別疾病後，緊接的保費到期日到期的保費為首期可獲豁免的保費，而所有附約亦會被終止。
2. 每個特別疾病只可獲支付一次 (特定器官之原位癌或早期癌症和冠狀動脈成形術除外) 。特定器官之原位癌或早期癌症和冠狀動脈成形術於本計劃最多可獲索償兩次，如要合資格享有第二次的特定器官之原位癌或早期癌症賠償，有關原位癌或早期癌症索償必須為受保器官，而且與之前索償並獲得支付賠償的相關器官不同。若相關器官由左右兩部分所構成 (包括但不限於肺或乳房) ，則左右兩部分將被視為同一個器官；如要合資格享有第二次的冠狀動脈成形術賠償，有關治療的主要冠狀動脈的狹窄或阻塞位置在首次索償時的冠狀動脈造影顯示，其狹窄程度為不多於60%。每名被保人於本計劃下所有保單就每宗特定器官之原位癌或早期癌症、冠狀動脈成形術及兒童之特別疾病的賠償上限為300,000港元 / 37,500美元。此權益可被支付直至保單所支付之危疾權益及/或特別疾病權益達到原有投保額的100%。
3. 當保單仍然生效，如被保人於就癌症、急性心肌梗塞或中風的危疾權益獲支付後隨後被診斷患上癌症、急性心肌梗塞或中風，並由被首次確認患上該癌症、急性心肌梗塞或中風的日期起存活最少14天，及根據以下條件，此權益將可獲得支付 :
   (a) 當就急性心肌梗塞或中風的危疾權益已被支付，隨後索償的癌症、急性心肌梗塞或中風的首次診斷日期，必須是在緊接上一次已獲保險賠償就急性心肌梗塞或中風的危疾權益之首次診斷日期最少相隔1年，才會獲得賠償。
   (b) 當就癌症的危疾權益已被支付，
      (i) 隨後索償的急性心肌梗塞或中風為之前已獲保單支付權益的癌症的首次診斷日期必須是在緊接上次已獲保險賠償就癌症的危疾賠償之首次診斷日期最少相隔1年，才會獲得賠償；或
      (ii) 隨後的癌症索償 (癌症復發及不同部位的癌症) 將可獲得賠償，假設 :
         - 若隨後癌症賠償的癌症為上次已獲保單賠償的癌症復發，該隨後賠償的癌症之首次確診日期必須是在3年無癌症期完結之後才會受到保障；
         - 若隨後癌症賠償的癌症並非上次已獲保單賠償的癌症復發，該隨後癌症賠償的癌症的首次確診日期必須是在緊接上次已獲保險賠償的癌症之首次確診日期最少相隔1年，才會受到保障。

         此權益只可獲得一次賠償。
4. 此權益只適用於簽發年齡為1 - 65 (下次生日年齡) 的被保人。可支付的金額相等於原有投保額之50%並將於危疾權益或身故權益獲賠償時支付。此權益只會被支付一次及將會於以下情況終止 : (i) 保單終止時；(ii) 危疾權益或身故權益已被支付或須被支付；或(iii) 第15個保單週年日，以較早者為準。此額外權益金額並不會從現有投保額中扣除。
5. 當被保人仍然在生及保單仍然生效，在危疾權益就急性心肌梗塞或中風被支付時，復康權益亦會於危疾權益就急性心肌梗塞或中風的賠償日起開始每月派發 (最多為6個月) 。此權益只會支付一次。
6. 優活健康管理現時由互康集團 (「互康」) 及其醫療網絡團隊提供，富衛有權隨時調整此服務而無需另行通知，並保留絕對決定權。 於本保單生效期間且於被保人在生時，在須支付第3組別的疾病 (與心臟及血管有關的疾病) 之危疾權益及 / 或特別疾病權益時，被保人可享有優活健康管理服務，惟須受以下條件規限 :
   - 當急性心肌梗塞或中風之危疾權益須予支付時，富衛將向被保人提供一次指定復康計劃而收費將被豁免 (每名被保人可享一次) 。
   - 當第3組別的疾病 (與心臟及血管有關的疾病，但急性心肌梗塞或中風除外) 之危疾權益及 / 或特別疾病權益須予支付時，富衛將轉介被保人參與指定的復康計劃，及就被保人所選的計劃支付首次會診費用 (每名被保人可享一次) 。被保人須承擔任何其他相關費用及收費。

   富衛亦將不會就互康及/或其醫療網絡團隊的行為、疏忽或失誤負上任何責任。此服務只適用於香港區域。
7. 此額外權益將於保單由保單簽發日或保單復效日 (以較遲者為準) 起計已生效至少連續2個保單年度起適用。保單權益人必須於嬰兒出生日起計180日內通知富衛以申請此權益。任何就初生嬰兒於此權益的賠償並不會扣減被保人的現有投保額及不會影響被保人於此保單的保障。
8. 適用於投保年齡為18 (下次生日年齡) 或以上的被保人。如被保人的投保年齡為17歲 (下次生日年齡) 或以下，身體檢查券將會於被保人20歲 (下次生日年齡) 之保單週年日起每2年派發1次，最多派發5次。
9. 當保單生效期達5年或以上，特別紅利(此為非保證金額)可能會於該保單作出危疾權益賠償或身故權益賠償、退保、或保單期滿或若保單失效且未於一年保單復效期內申請復效，在該復效期屆滿時支付。按比例之非保證特別紅利(如有)亦可能會於支付特別疾病權益或部份退保時派發，及後應付的非保證特別紅利 (如有)將會按比例相應減少。非保證特別紅利於保單所支付之危疾權益及/或特別疾病權益總額達到原有投保額的100%後將不再派發。

10. 臻一現時由互康及其醫療網絡團隊提供，並非保單條款之一部分或保障內容及只適用於本計劃。富衛有權隨時撤銷或調整此服務而無需另行通知，並保留絕對決定權。富衛亦將不會就互康及/或其醫療網絡團隊的行為、疏忽或失誤負上任何責任。此服務只適用於香港區域。臻一的熱線號碼為 (香港) (852) 8120 9066及內地免費專線號碼400 9303078。詳情請參閱隨附之臻一宣傳單張。
11. 第二醫療意見服務現時由國際SOS提供，所有相關服務收費及費用 (如有) 需由被保人自行支付。富衛將不會就國際SOS的行為或疏忽負上任何責任。而有關詳情或將被不時調整，富衛恕不另行通知。
12. 家庭關懷服務現時由奧思禮提供，並且非保證續保。所有相關收費及費用 (如有) 需由被保人自行支付。富衛將不會就奧思禮及 / 或任何其附屬機構的行為或疏忽負上任何責任。而有關詳情或將被不時調整，富衛恕不另行通知。
13. 保費率並非保證不變，富衛保留不時對保費作出檢討及調整之權利。
14. 需受富衛當時所規定之每位被保人於所有指定危疾計劃的最高總投保額所限。
15. 若寬限期不獲得延長，在繳付首期保費後，任何到期繳付保費之保單的寬限期為30天。

重要事項及聲明：

i. 本計劃由富衛承保，富衛全面負責一切計劃內容、保單批核、保障及賠償事宜。在投保前，您應考慮本計劃是否適合您的需要及您是否完全明白本計劃所涉及的風險。除非您完全明白及同意本計劃適合您，否則您不應申請或購買本計劃。在申請本計劃前，請細閱以下相關風險。

ii. 本計劃資料是由富衛發行。富衛對本計劃資料所載資料的準確性承擔一切責任。本計劃資料只在香港特別行政區派發，並不能詮釋為在香港特別行政區境外出售，游說購買或提供富衛的保險產品。本計劃的銷售及申請程序必須在香港特別行政區境內進行及完成手續。

iii. 本計劃是一項保險產品。繳付之保費並非銀行存款或定期存款，本計劃不受香港特別行政區存款保障計劃所保障。

iv. 本計劃乃一項含有儲蓄成份的危疾分紅壽險產品。保險費用成本及保單相關費用已包括在本計劃的所需繳付保費之內，儘管本計劃的主要推銷文件 / 小冊子及 / 或本計劃的銷售文件沒有費用與收費表 / 費用與收費部份或沒有保費以外之額外收費。

v. 本計劃是一項儲蓄危疾保險產品。如您在保單期滿前退保，您可收回的款額可能會低於您已繳付的保費總額。

vi. 所有核保及理賠決定均取決於富衛，富衛根據投保人及被保人於投保時所提供的資料而決定接受投保申請還是拒絕有關申請，並退回全數已繳交之保費及保費徵費(如有) (不連帶利息)。富衛保留接納/拒絕任何投保申請的權利並可拒絕您的投保申請而毋須給予任何理由。

vii. 以上全部權益及款項將於扣除保單負債 (如有) (如未清繳之保費或保單貸款及其利息)，如有，後支付。

viii. 有關過去紅利資料，請參考富衛網頁 (https://www.fwd.com.hk/tc/regulatory-disclosures/fulfilment-ratios/)。以下是富衛派發紅利的理念及投資策略：

(i) 派發紅利的理念 (最新資料請參考富衛網頁
https://www.fwd.com.hk/tc/regulatory-disclosures/dividend-bonus-declaration-philosophy/)

由富衛發出的分紅保單所派發予保單權益人之紅利乃非保證。

保單權益人可透過宣佈紅利分享分紅保單的財務表現。財務表現涵蓋支持保單的資產的有關投資回報的投資表現，及其他因素包括但不限於費用、續保率、索償和有關內部和外部狀況的展望。富衛將對比長期表現與實際表現，若長期表現較實際表現不同，非保證紅利將會因而調整。

基於不同產品的計劃內容及保單權益有所不同，紅利變動的次數和幅度或會因不同產品而異。一般來說，較高風險的產品的紅利調整的次數會較多，幅度亦較為明顯。同一產品下的保單可能被分配到有不同紅利的不同組別，旨在更準確地反映有關財務表現。

為減低紅利在保單年期內短期性波動及穩定紅利，富衛可能派發部分相關年度財務表現予保單權益人。

富衛至少每年檢討及宣佈紅利，並會由董事會主席，獨立非執行董事及獲委任精算師作書面聲明。

(ii) 投資策略(最新資料請參考富衛網頁
https://www.fwd.com.hk/tc/regulatory-disclosures/dividend-bonus-declaration-philosophy/)

富衛的投資組合採用均衡資產分配投資策略，主要包括投資級別的固定收益類型證券，以履行保證保單財務責任。為提高長遠投資表現予非保證保單權益，此投資組合亦包括股權類型投資，主要包括上市股票、互惠基金及私募股權。投資策略：固定收益類型證券 (目標之60%) 及股權類型投資 (目標之40%)

在投資組合規模容許下，投資將橫跨於不同地區及行業達到多元化效果。

富衛會透過直接投資於與保單相同貨幣或與保單貨幣對沖的工具，減低有關保單之貨幣風險。現時的投資組合主要投資於美國及亞太地區以美元為主的資產。

此外，投資組合是由專業投資人士管理。除定時檢討，富衛亦保留不時更改投資策略權利，並會將重大改變通知保單權益人。

ix. 如您對保單不滿意，則在您未曾於本保單下作出過任何索償的前提下，您有權在「冷靜期」內以書面要求取消保單及取回所有已繳交的保費及保費徵費(如有)。您必須確保富衛辦事處在您的保單的「冷靜期」(保單交付給您 / 您的代表或《通知書》(說明已經可領取保單和「冷靜期」的屆滿日) 發予您 / 您的代表後起計的21天內，以較早者為準。) 屆滿日或之前直接收到附有您的親筆簽署的通知書。

富衛辦事處的地址為香港中環德輔道中308號富衛金融中心1樓。

x. 於保單或附約生效期間，保單權益人可向富衛作出書面申請退回或終止保單或附約。

xi. 本計劃之保單條款受香港特別行政區的法律所規管。

xii. 以上資料只供參考及旨在描述本計劃主要特點，有關條款細則的詳細資料及所有不保事項，請參閱保單條款。本單張及保單條款內容於描述上有任何歧異，應以保單條款英文原義為準。如欲在投保前參閱保險合約條款及細則，您可向富衛索取。本單張中英對照，如有任何歧異，概以英文原義為準。

xiii. 富衛必須遵從稅務條例的下列規定以便稅務局自動交換某些財務帳戶資料：
(i) 識辨非豁除「財務帳戶」的帳戶（「非豁除財務帳戶」）；
(ii) 識辨非豁除財務帳戶的個人持有人及非豁除財務帳戶的實體持有人作為稅務居民的司法管轄區；
(iii) 斷定以實體持有的非豁除財務帳戶為「被動非財務實體」之身份及識辨控權人作為稅務居民的司法管轄區；
(iv) 收集有關非豁除財務帳戶的資料（「所需資料」）；及
(v) 向稅務局提供所需資料。
保單權益人必須遵從富衛所提出的要求用以符合上述規定。

重要保單條款

不再異議

以保單簽發日起計算，保單於被保人在生時生效滿兩年後，富衛不再對受保證明文件作出任何異議；若有欺詐行為或不繳付保費，則作別論。

自殺身亡

若被保人在保單簽發日起十三個月內因自殺身亡，無論其精神正常與否，富衛之賠償責任，僅限於退回所有不連利息之已繳付保費，而總欠款及已賠償權益亦將扣除。

本產品有哪些主要風險?

信貸風險

本計劃是由富衛發出的保單。投保本保險產品或其任何保單利益須承受富衛的信貸風險。保單權益人將承擔富衛無法履行保單財務責任的違約風險。

流動性風險

本計劃為長期保險保單。此長期保險保單有既定的保單期限，保單期限由保單生效日起至保單期滿日止。保單含有價值，如您於較早的保障年期或保單期滿日前退保，您可收回的金額可能會大幅低於您已繳付的保費總額。投保本計劃有機會對您的財務狀況構成流動性風險，您須承擔本計劃之流動性風險。

外幣匯率及貨幣風險

投保外幣為保單貨幣的保險產品須承受外幣匯率及貨幣風險。請注意外幣或會受相關監管機構控制及管理（例如，外匯限制）。若保險產品的貨幣單位與您的本國貨幣不同，任何保單貨幣對您的本國貨幣匯率之變動將直接影響您的應付保費及可取利益。舉例來說，如果保單貨幣對您的本國貨幣大幅貶值，因匯率波動引致的潛在損失將對您於本計劃可獲得的利益及繳付保費的負擔構成負面影響。

通脹風險

請注意通脹會導致未來生活費用增加。即使富衛履行所有合約責任，實際保單權益可能不足以應付將來的保障需要。

提早退保風險

如您在較早的保障年期或在保單期滿日前退保，您可收回的款額可能會大幅低於您已繳付的保費總額。

不保證權益

不保證權益（包括但不限於週年紅利/特別紅利）是非保證的，並按照派發紅利的理念由富衛自行決定。

不保事項

以下不保事項適用於危疾權益、特別疾病權益及指定危疾之多重權益。
若被保人直接或間接由下列任何原因引致損失/索償，將不能獲得賠償：

1. 感染人類免疫力缺乏病毒（HIV）所引致之任何疾病，包括愛滋病（AIDS）及/或源於HIV感染引發的各種突變，衍生或變異（「因輸血感染人類免疫力缺乏病毒」及「因職業感染人類免疫力缺乏病毒」除外）。
2. 蓄意自我毀傷或企圖自殺，不論當時神智是否清醒，或是否受藥物或酒精影響。
3. 參與任何刑事犯罪。
4. 由於服用過量有毒性之藥物，精神科藥物，吸毒或濫用酒精或濫用溶劑及物質而引起任何狀況，醫生處方開列用於治療傷病之藥物除外。

保費調整

保費為非保證，並可因各種因素而大幅增加，當中包括但不限於索償經驗及保單續保率。但保費不會按照被保人之下次生日年齡而增加。

保費年期及欠繳保費

保單的保費供款年期為10年或15年或20年。任何到期繳付之保費均可獲富衛准予保費到期日起計30天的寬限期。若在寬限期後仍未繳付保費而保單沒有現金價值，保單將由首次未繳保費的到期日起終止。若保單有可作貸款的現金價值，富衛將自動從該現金價值以貸款形式撥出部份現金以墊繳保費。當保單貸款及利息總額相等於或超逾保單可貸款的現金價值時，保單將會終止，而您可能會失去全部權益。

終止保單

本保單將在下列其中一個日期終止，以較早者為準：

1. 被保人身故日；
2. 本保單之期滿日；
3. 根據富衛退保相關規定而釐定之退保日；
4. 因未能繳交保費而導致本保單終止，而終止日根據寬限期或延伸寬限期權益（視乎情況而定）釐定；
5. 欠款相等於或超逾本保單的保證現金價值；或
6. 已支付及 / 或須支付的總索償額達到原有投保額的100%（除非癌症、急性心肌梗塞或中風之危疾權益須予支付，指定危疾之多重權益已支付而本保單終止）。如達到總和限額，所有附約亦將告終止。

以上資料只供參考及旨在描述計劃主要特點，有關條款細則的詳細資料，請參閱保單條款。如本文件及保單條款內容於描述上有任何歧異，應以保單條款英文原義為準。本文件中英對照，如有任何歧異，概以英文原義為準。

如欲查詢詳情，請聯絡交通銀行(香港)有限公司。

Remarks:

1. FWD Life Insurance Company (Bermuda) Limited ("FWD") will pay the Crisis Benefit / Special Disease Benefit / Multiple Benefit for Designated Crises only where the First Symptoms appear, the condition occurs and the diagnosis or surgery relating to the relevant Disease occurs after the first 90 days from the Policy Date or the date of last reinstatement, whichever is later. This first 90 days limitation does not apply if any Disease is solely and directly caused by an Accident and independently of any cause. Upon the payment of claims under Special Disease Benefit, the Current Sum Insured of the Plan will be reduced accordingly. Current Sum Insured means the Initial Sum Insured less any claims paid and / or payable for Special Disease Benefit under the Policy. Death Benefit, Crisis Benefit, Guaranteed Cash Value, future premium and non-guaranteed Special Bonus (if any) will be reduced accordingly. If the total claims paid of Crisis Benefit and/or Special Disease Benefit under the Policy reach 100% of the Initial Sum Insured while the Policy is still inforced, FWD will waive the balance of premium payable under the Plan falling due immediately after the date following the diagnosis of the Crisis or Special Disease which leads the total claim paid under the Policy to reach 100% of the Initial Sum Insured and all the riders will be terminated.
2. Each Special Disease is payable once only (except Carcinoma-in-situ or Early Stage Malignancy of Specific Organs and Angioplasty of Coronary Artery). A maximum of two claims can be made in respect of Carcinoma-in-situ or Early Stage Malignancy of Specific Organs and Angioplasty of Coronary Artery under the Plan. To be eligible for the second claim under Carcinoma-in-situ or Early Stage Malignancy of Specific Organs, the claims must be a Carcinoma-in-situ or Early Stage Malignancy of one of the covered organs that is different from the organ(s) of the previous claims for which benefit(s) have / has been paid. If the relevant covered organ has both a left and a right component (such as, but not limited to the lungs or breasts), the left side and right side of the organ shall be considered one and the same organ. To be eligible for the second claim under Angioplasty of Coronary Artery, the treatment must be performed on a location of stenosis or obstruction in a major coronary artery where no stenosis greater than 60 percent was identified in the coronary angiogram relating to the first claim of this illness, for which benefit has been paid. A maximum of HK$300,000 / US$37,500 per Insured of each claim is payable under all policies of the Plan for Carcinoma-in-situ or Early Stage Malignancy of Specific Organs, Angioplasty of Coronary Artery and Special Diseases for Juvenile. This benefit will be payable until the total payment of Crisis Benefit and/or Special Disease Benefit under the Policy reach 100% of the Initial Sum Insured.
3. While the Policy is inforced, this Benefit is payable if, following payment of a Crisis Benefit for Cancer, Heart Attack or Stroke, the Insured is diagnosed with a subsequent Cancer, Heart Attack or Stroke and survives for a period of at least 14 days from the date of first confirmed diagnosis of such respective Cancer, Heart Attack or Stroke, subject to the following conditions:
   (a) If the Crisis Benefit for Heart Attack or Stroke has been paid, a subsequent claim for Cancer, Heart Attack or Stroke can be made provided that the first confirmed diagnosis of the subsequent claim for Cancer, Heart Attack or Stroke shall be at least 1 year after the date of the first confirmed diagnosis of the immediately preceding Crisis Benefit claim for Heart Attack or Stroke (for which benefit has been paid under the Policy).
   (b) If the Crisis Benefit for Cancer has been paid,
      (i) A subsequent claim for Heart Attack or Stroke can be made provided that the first confirmed diagnosis of the subsequent claim for Heart Attack or Stroke shall be at least 1 year after the date of the first confirmed diagnosis of the immediately preceding Crisis Benefit claim for Cancer (for which benefit has been paid under the Policy); or
      (ii) A subsequent claim for Cancer (both recurring Cancer and Cancer in different sites) can be made provided that,
         - if the Cancer of the subsequent claim for Cancer is a Recurrence of the Cancer of the preceding claim for Cancer (for which benefit has been paid), the Cancer of the subsequent claim for Cancer shall be covered only if its date of the first confirmed diagnosis is after a Three-year Cancer-free Period;
         - if the Cancer of the subsequent claim for Cancer is not a recurrence of the Cancer of the preceding claim for Cancer (for which benefit has been paid), the Cancer of the subsequent claim for Cancer shall be covered only if the first confirmed diagnosis of the subsequent Cancer takes place at least 1 year after the date of the first confirmed diagnosis of the Cancer of the immediately preceding claim for Cancer (for which benefit has been paid).

         This benefit will be payable only once.

4. The benefit is only applicable to Insured whose issue age is 1 - 65 (age next birthday). The amount payable is equivalent to 50% of the Initial Sum Insured as at the date when the Crisis Benefit or Death Benefit is payable under the Policy. This benefit will be payable once only under the Policy and will be ceased (i) upon the termination of the Policy; (ii) once the Crisis Benefit or Death Benefit has been paid or becomes payable; or (iii) on the 15th Policy Anniversary Date, whichever is the earliest. This additional benefit amount will not be deducted from the Current Sum Insured.
5. While the Insured is alive and the Policy is in force, when the Crisis Benefit for Heart Attack or Stroke is payable, Rehabilitation Benefit will be payable for every month (up to a maximum of 6 months) starting from the payment date of the Crisis Benefit for Heart Attack or Stroke. This benefit will be payable once only.
6. Lifestyle Management Program is provided by HealthMutual Group Limited ("HMG") and its healthcare network team currently. FWD reserves the right to vary the services in its sole discretion without further notice. While this Policy is in force and the Insured is still alive, when Crisis Benefit and / or Special Disease Benefit for Group 3 Diseases (Illnesses related to Circulatory System) is payable, the Insured is eligible for the Lifestyle Management Program, subject to the following conditions:
   - When the Crisis Benefit for Heart Attack or Stroke is payable, FWD will provide a designated rehabilitation program to the Insured and the fee will be waived once per life.
   - When the Crisis Benefit and/or Special Disease Benefit for Group 3 Diseases (Illnesses related to Circulatory System, except Heart Attack or Stroke) is payable, FWD will refer the Insured to the designated rehabilitation programs and pay the initial consultation fee, once per life, of the program chosen by the Insured. All other relevant fees and charges will be borne by the Insured. FWD shall not be responsible for any act, negligence or failure to act on the part of HMG and its healthcare network team. This service is only available in Hong Kong region.
7. This additional benefit is available if the Policy has been in effect for at least 2 consecutive Policy Years after the Policy Date or the date of reinstatement, whichever is later. Policy Owners have to notify FWD within 180 days from the date of birth of the infant for application of this benefit. Any claim of the new-born infant under this benefit shall not be deducted from the Insured's Current Sum Insured and will not affect the other benefits available for the Insured under this Policy.
8. Available for Insured whose issue age is 18 (age next birthday) or above. If the issue age of Insured is 17 (age next birthday) or below, medical check-up coupon will be available biennially to the Insured starting from the Policy Anniversary of the Insured's age of 20 at next birthday, and is entitled to a maximum of 5 medical check-up coupons.
9. When the Policy has been in effect for 5 years or more, a Special Bonus, which is not guaranteed, may be payable under the Policy upon the payment of Crisis Benefit or Death Benefit under the Policy, surrender, maturity or at the end of the one year reinstatement period if the policy lapses and is not reinstated within that period. A proportionate non-guaranteed Special Bonus, if any, may be also paid upon payment of the Special Disease Benefit or partial surrender. Non-guaranteed Special Bonus will then be reduced on a pro rata basis accordingly. Non-guaranteed Special Bonus will not be payable when total payment of Crisis Benefit and/or Special Disease Benefit under the Policy reach 100% of the Initial Sum Insured.
10. This service, provided by HMG and its healthcare network team currently, is not a part of the Policy or benefit item under the Policy Provisions and only applicable to the Plan. FWD reserves the right to terminate or vary the service in its sole discretion without further notice. FWD shall not be responsible for any act, negligence or failure to act on the part of HMG and its healthcare network team. This service is only available in Hong Kong region. The hotline for THE ONEcierge is (852) 8120 9066 for Hong Kong and there is also a toll-free number for Mainland, 400 9303078. For details, please refer to the attached THE ONEcierge's brochure.
11. The service is provided by International SOS currently and is not guaranteed renewable. All relevant fees and charges (if any) of this service shall be borne by the Insured. FWD shall not be responsible for any act or failure to act on the part of International SOS. Details of the services may be revised from time to time without FWD's prior notice.
12. The service is provided by Aspire Lifestyles ("Aspire") currently and is not guaranteed renewable. All relevant fees and charges (if any) of this service shall be borne by the Insured. FWD shall not be responsible for any act or failure to act on the part of Aspire and/or any of its affiliates. Details of the services may be revised from time to time without FWD's prior notice.
13. Premium rates are not guaranteed and FWD reserves the right to review the premium rates from time to time.
14. Subject to the aggregate maximum Sum Insured per life of all designated critical illness policies, which is determined by FWD's prevailing rules and regulations.
15. If the Grace Period is not extended, the usual Grace Period of 30 days after the premium due date for payment of each premium after the first will apply.

Important Notes and Declarations:

i. This Plan is underwritten by FWD. FWD is solely responsible for all features, Policy approval, coverage and benefit payment under the Plan. FWD recommends that you carefully consider whether the Plan is suitable for you in view of your financial needs and that you fully understand the risk involved in the Plan before submitting your application. You should not apply for or purchase the Plan unless you fully understand it and you agree it is suitable for you. Please read through the following related risks before making any application of the Plan.

ii. This Plan material is issued by FWD. FWD accepts full responsibility for the accuracy of the information contained in this product material. This product material is intended to be distributed in the Hong Kong Special Administrative Region only and shall not be construed as an offer to sell, a solicitation to buy or the provision of any insurance products of FWD outside the Hong Kong Special Administrative Region. All selling and application procedures of the Plan must be conducted and completed in the Hong Kong Special Administrative Region.

iii. The Plan is an insurance product. The premium paid is not a bank savings deposit or time deposit. The Plan is not protected under the Deposit Protection Scheme in the Hong Kong Special Administrative Region.

iv. This Plan is a participating life product with a savings element and critical illness protection. The costs of insurance and the related costs of the Policy are included in the premium paid under this Plan despite the product brochure / leaflet and / or the illustration documents of this Plan having no schedule / section of fees and charges or no additional charge noted other than the premium.

v. The Plan is a savings and critical illness insurance product. If you surrender your Policy before its maturity date, the amount you get back may be less than the total premium you have paid.

vi. All underwriting and claims decisions are made by FWD. FWD relies upon the information provided by the applicant and the Insured in the insurance application to decide to accept or decline the application with a full refund of any premium paid and any insurance levy paid without interest. FWD reserves the right to accept / reject any insurance application and can decline your insurance application without giving any reason.

vii. All the above benefits and payment are paid after deducting Policy debts (if any, e.g. unpaid premiums or premium loan and the interest of the loan).

viii. Please refer to FWD's website (https://www.fwd.com.hk/en/regulatory-disclosures/fulfilment-ratios/) for dividend/ bonus history. The dividend / bonus declaration philosophy and investment strategy of FWD are shown below:

(i) Dividend / Bonus Declaration Philosophy(Please refer to FWD's website for latest information:
https://www.fwd.com.hk/en/regulatory-disclosures/dividend-bonus-declaration-philosophy/)

FWD issues participating policies, which offer the Policy Owners with dividend / bonus benefits that are not guaranteed.

Through the policy dividend / bonus declaration, the Policy Owners participate in the financial performance of the participating products. Financial performance covers investment performance of the underlying investment return on asset supporting those policies, as well as other factors including but not limited to expenses, persistency, claims and the future outlook as pertaining to both internal and external conditions. The experience over the long-term is compared against expectation, and the non-guaranteed dividend / bonus is adjusted if the experience over the long-term is different from the expectation.

Due to the variation of features and benefits of different products, the frequency and magnitude for the change in dividend / bonus scale may vary for different products. In general, the adjustments on dividend / bonus scale are more frequent and significant for products with higher risk profile. Policies of the same product may be separated into different bucket with different dividend / bonus rates, with an aim to more closely reflect the underlying financial performance.

To stabilize the dividend / bonus, FWD may distribute a proportion of the financial performance in a particular year attributable to the Policy Owners, with an aim to smooth out the short-term volatility of dividend / bonus rate over the course of the policy term.

FWD review and declare the dividend / bonus rate at least annually, with written declaration by the Chairman of the Board, an Independent Non-Executive Director and the Appointed Actuary.

(ii) Investment Strategy

(Please refer to FWD's website for the latest information:
https://www.fwd.com.hk/en/regulatory-disclosures/dividend-bonus-declaration-philosophy/)

FWD's asset portfolio employs a balanced asset allocation investment strategy, which consists primarily of investment graded fixed income type securities to meet the guaranteed financial obligation. Equity-type investments, with majority invested in listed equity, mutual fund and private equity, are also utilized to enhance the investment performance in the long run for non-guaranteed benefits. The investment strategies are customized for different products to optimize the return: Fixed income type securities (Target 60 %) and equity-type investments (Target 40%)

The asset portfolio also targets to provide diversification across different geographic regions and industries to the extent the size of portfolio can support.

Currency exposure of the underlying policies is mitigated by closely matching either through direct investments in the same currency denomination or the use of currency hedging instruments. Currently, the majority of the asset is invested in the United States and Asia Pacific and denominated in USD.

Furthermore, the asset portfolio is actively managed by investment professionals to closely monitor the investment performance. In addition to conducting regular review, FWD also reserves the right to change the investment strategy and shall notify Policy Owners of any material changes.

ix. If you are not satisfied with the Policy, you have the right to cancel it within the Cooling-off Period and obtain a refund of any premium paid and any insurance levy paid provided that you have not made any claims under the Policy. A written notice signed by you should be received by the office of FWD at 1/F., FWD Financial Centre, 308 Des Voeux Road Central, Hong Kong within the Cooling-Off Period (that is, 21 days after either the delivery of the Policy or the issue of a Notice informing you or your representative that the Policy is available for collection and Expiry Date of the Cooling-off Period, whichever is earlier).

x. While the Policy or rider is in force, the Policy Owner may surrender or terminate the Policy or rider by sending a written request to FWD.

xi. The Policy Provisions of the Plan are governed by the laws of the Hong Kong Special Administrative Region.

xii. This product material is for reference only and is indicative of the key features of the Plan. For the exact terms and conditions and the full list of exclusions of the Plan, please refer to the Policy Provisions of the Plan. In the event of any ambiguity or inconsistency between the terms of this leaflet and the Policy Provisions, the Policy Provisions in English shall prevail. If you want to read the terms and conditions of the Policy Provisions before making an application, you can obtain a copy from FWD. In the event of discrepancies between the English and Chinese versions of this product material, the English version shall prevail.

xiii. FWD must comply with the following requirements of the Inland Revenue Ordinance to facilitate the Inland Revenue Department automatically exchanging certain financial account information:
   (i) to identify accounts as non-excluded "financial accounts" ("NEFAs");
   (ii) to identify the jurisdiction(s) in which NEFA-holding individuals and NEFA-holding entities reside for tax purposes;
   (iii) to determine the status of NEFA-holding entities as "passive NFEs" and identify the jurisdiction(s) in which their controlling persons reside for tax purposes;
   (iv) to collect information on NEFAs ("Required Information"); and
   (v) to furnish Required Information to the Inland Revenue Department.

   The Policy Owner must comply with requests made by FWD to comply with the above listed requirements.

Important Policy Terms

Incontestability
The policy shall be incontestable after it has been in force during the lifetime of the Insured for two years from the policy date, except if there has been fraud or non-payment of premium.

Suicide
If the Insured dies by suicide, whether sane or insane, within thirteen calendar months from the policy date, FWD's liability shall be limited to the amount of the premiums paid without interest, less any Indebtedness and any benefit which has been paid under this Policy.

What are the key product risks?

Credit risk
This Plan is an insurance policy issued by FWD. The application of this insurance product and all benefits payable under your Policy are subject to the credit risk of FWD. You will bear the default risk in the event that FWD is unable to satisfy its financial obligations under this insurance contract.

Liquidity risk
This plan is a long term insurance policy. This Policy of long term insurance will be made for certain determined term of years starting from the Policy effective date to the Policy maturity date. The Policy contains value and, if you surrender your Policy in the early Policy years or before its maturity date, the amount you get back may be considerably less than the total premium you have paid. Application of the Plan may constitute the liquidity risk to your financial condition. You need to bear the liquidity risk associated with the Plan.

Exchange rate and currency risk
The application of this insurance product with the Policy currency denominated in a foreign currency is subject to that foreign currency's exchange rate and currency risk. The foreign currency may be subject to the relevant regulatory bodies' control (for example, exchange restrictions). If your home currency is different from the Policy currency, please note that any exchange rate fluctuation between your home currency and the Policy currency of this insurance product will have a direct impact on the amount of premium required and the value of benefit(s) to be received. For instance, if the Policy currency of the insurance product depreciates substantially against your home currency, the potential loss arising from such exchange rate movement may have a negative impact on the benefits you receive from the Plan and your burden of the premium payment.

Inflation risk
The cost of living in the future may be higher than now due to the effects of inflation. Therefore, the benefits under this Policy may not be sufficient for the increasing protection needs in the future even if FWD fulfills all of its contractual obligations.

Early surrender risk
If you surrender your Policy in the early Policy Years or before its maturity date, the amount of the benefit you will get back may be considerably less than the total amount of the premiums you paid.

Non-guaranteed benefits
Non-guaranteed benefits (including but not limited to Annual Dividend/Special Bonus) are not guaranteed and are determined at FWD's discretion based on its Dividend/Bonus declaration philosophy.

Exclusions
The below exclusions apply to Crisis Benefit, Special Disease Benefit and Multiple Benefit for Designated Crises.
This Policy shall not cover any loss / claim directly or indirectly caused by or resulting from any of the following:

1. Human Immunodeficiency Virus (HIV) related illness, including Acquired Immunization Deficiency Syndrome (AIDS) and / or any mutations, derivations or variations thereof, which is derived from an HIV infection (Except "HIV due to Blood Transfusion" and "Occupationally Acquired HIV").
2. Intentional self-inflicted injury or attempted suicide, while sane or insane and while intoxicated or not.
3. The participation in any criminal event.
4. Any condition arising out of consumption of poisoning drugs, psychiatric drug, drug abuse, alcohol abuse, abuse of solvents and other substances unless prescribed by a medical practitioner for treatment.

Premium adjustment
The premium is non-guaranteed and may significantly increase due to factors including but not limited to claims experience and policy persistency. However, the premium will not be increased based on the age of the Insured on his or her next birthday.

Premium term and non-payment of premium
The premium payment term of the Policy is 10, 15 or 20 years. FWD allows a Grace Period of 30 days after the premium due date for payment of each premium. If a premium is still unpaid at the expiration of the Grace Period and the Policy has no cash value, the Policy will be terminated from the date the first unpaid premium was due. If the Policy has any loanable cash value, FWD shall automatically advance the amount of premium due as a loan against such loanable cash value of the Policy. Once the total amount of outstanding loan and interest accrued thereon is equal to or exceeds the loanable cash value of the Policy, the Policy will be terminated. Please note that once the Policy is terminated on this basis, you will lose all of your benefits.

Termination conditions
The Policy shall terminate on the earliest of the following:
1. The death of the Insured;
2. The Expiry Date of this Policy;
3. The date of Policy surrender. Such date is determined in accordance with FWD's applicable rules and regulations in relation to Policy surrender;
4. The date of termination of this Policy due to default in payment of any premium determined in accordance with Grace Period or Extended Grace Period Benefit (as the case may be);
5. The Indebtedness equals or exceeds the Guaranteed Cash Value of this Policy; or
6. The Total Claims paid and / or payable reaches 100% of the Initial Sum Insured (except where Crisis Benefit for Cancer, Heart Attack or Stroke is payable, where this Policy will be terminated when the Multiple Benefit for Designated Crises has been paid). All riders will also be terminated once the Aggregate Limit is reached.

The above information is for reference only and is indicative of the key features of the Plan. For a complete explanation of the terms and conditions, please refer to the policy provisions. In the event of any ambiguity or inconsistency between the terms of this document and the policy provisions in English shall prevail. In the event of any discrepancy between the English and Chinese version of this document, the English version shall prevail.

For enquiries, please contact Bank of Communications (Hong Kong) Limited.

[交通銀行(香港)有限公司適用]
(本披露以中英撰寫，如有歧異，概以英文版本為準。)

向人壽保險客戶披露的重要事項

第1部份: 定義與釋義
在下述的披露中:
- 「銀行」指交通銀行(香港)有限公司
- 「保險公司」指富衛人壽保險 (百慕達) 有限公司
- 「保險計劃/本計劃」指產品刊物所列明之保險計劃名稱的保險產品
- 「投保申請」指填寫申請書號碼的相關申請
- 「本人/投保人」指投保申請內之投保人
- 「被保人/受保人」指投保申請內之受保人

第2部份: 向投保人披露的重要事項

2.1 銀行與保險公司的關係及責任
- 銀行為保險公司之獲委任保險代理商，銀行負責代理銷售由保險公司承保的保險計劃及協助為閣下辦理本計劃的投保手續。
  本計劃是由保險公司承保，保險公司已獲保險業監管局授權經營，並受其監管。本計劃為保險公司之產品，而非銀行之產品。保險公司全面負責一切計劃內容、保單批核、保障及賠償事宜。有關本計劃保單之權益、權利及賠償，保單持有人或受益人應向保險公司作出查詢及追索。
- 對於銀行與客戶之間因銷售過程或處理有關交易而產生的合資格爭議 (定義見金融糾紛調解計劃的金融糾紛調解的中心職權範圍)，銀行須與客戶進行金融糾紛調解計劃程序；然而，對於有關產品的合約條款的任何爭議應由保險公司與客戶直接解決。

2.2 風險披露本計劃所須承受之主要風險包括但不限於 :

- 信貸風險
  投保本計劃或本計劃的任何保單權益須承受保險公司的信貸風險。閣下就本計劃支付的保費將成為保險公司的資產的一部份。閣下對該資產並無任何產權或擁有權，亦不享有與這些資產有關的任何權利。如追討賠償，閣下只可向保險公司追索。

- 流動性風險
  本計劃屬非投資相連長期保險類別，長期保險類別保單會有一定的既定保單期限，保單期限由保單生效起至保單期滿止，該期限可以為幾年、十年以上或至被保人終身。部份具有保單價值的長期保險保單戶口 (包括但不限於儲蓄壽險、終身壽險或年金等) ，如閣下在保單生效早期需要退保或在保單期滿日前提早退保，閣下可收回的款額可能會大幅低於閣下已繳付的保費。投保本計劃有機會對閣下財務狀況構成流動性風險，閣下須承擔本計劃之流動性風險。

- 匯率及貨幣風險 (只適用於人民幣為保單貨幣計劃或選擇以外幣為保單貨幣的情況)
  - 投保以人民幣為保單貨幣的計劃或選擇以外幣為保單貨幣須承受匯率及貨幣風險，人民幣兌港幣匯率及外幣兌港幣匯率可升可跌。
  - 如閣下選擇以港幣繳付保費，閣下必須以保險公司不時全權根據市場人民幣與港幣的兌換率 (適用於保單貨幣為人民幣) 或所選外幣與港幣的兌換率 (適用於保單貨幣為外幣) 而釐定的匯率繳付保費。因此，人民幣與港幣的兌換率、所選外幣與港幣的兌換率之變動將直接影響以港幣繳付之保費，如因匯率浮動而導致人民幣或所選外幣在保單簽發後升值，日後以港幣計算之保費將會較投保時保費為高。
  - 應付權益 (包括退還保費等) 將以人民幣或所選外幣支付。(以人民幣作為保單貨幣的保單，如閣下選擇以港幣收取有關權益，有關支付金額將以保險公司不時全權根據市場人民幣與港幣的兌換率而釐定的匯率計算後以與人民幣同等價值的港幣支付。以外幣作為保單貨幣的保單，如閣下選擇以港幣收取有關權益，有關支付金額將以保險公司不時全權根據市場該外幣與港幣的兌換率而釐定的匯率計算後以與該外幣同等價值的港幣支付。) 任何人民幣兌港幣匯率、外幣兌港幣匯率之波動將會直接影響以港幣結算的權益，如有關權益於到期支付時以港幣計算而人民幣或所選外幣大幅貶值，閣下將失去大部分的應付權益。
  - 若因法規變動或因其他由保險公司全權決定之理由，以人民幣為保單貨幣的保單之保費或權益無法以人民幣或港幣支付；以外幣為保單貨幣的保單之保費或權益無法以所選外幣或港幣支付，保險公司可依其認為公正與適當之條件全權決定有關保單可收取保費、應付權益及退還保費之貨幣、貨幣兌換匯率及其計算。
  - 人民幣現時並非自由兌換的貨幣，透過或由香港銀行進行的人民幣兌換或提供的人民幣服務，須受制於若干有關人民幣的政策或其他限制及相應的有關香港監管要求。有關要求將不時更改而毋須另行通知。

- 市場及利率風險 (適用於保險計劃附有保證及/或非保證回報)
  人壽保單的保證回報部份 (例如 : 現金價值) 所牽涉的市場及利率風險由保險公司承擔，市場波動及利率變化不會影響客戶保單的保證回報。非保證回報部份 (例如 : 保單紅利) 可能受市場及利率風險影響保險公司實際派發予保單的金額及保險公司的積存年利率決策可能受市場及利率風險影響，因此，閣下需承擔人壽保單非保證回報部份所牽涉的市場及利率風險。

- 通脹風險
  未來的生活費或會因通脹而比現時的生活費為高，即使保險公司已履行所有保單合約的條款及責任，閣下由保單獲發之金額在通脹調整後的實際水平可能相對下降。

2.3 保費逾期繳交或未付款的情況及後果

- 有儲蓄成份的保險產品[有儲蓄但沒有投資成份] (適用於非分紅保單) 或有投資成份的保險產品 [投資決定及風險由保險公司承擔] (適用於分紅保單)
  如有任何保費逾期繳交或未付款，保單會自動貸款墊繳保費 (如適用) ，或被終止。在保單進行自動貸款墊繳保費期間，保險公司會自動以貸款形式從保單的現金價值撥出現金用以墊繳已到期的保費，一旦保單的貸款及其累積利息相等於或超出保單所累積之現金價值時，保單將自動終止。如保單被自動終止，保單將會變成毫無價值及保單的受保人將會失去保單的保險保障。

- 有投資成份的保險產品[投資決定及風險由保險公司承擔] (適用於萬用壽險計劃)
  如有任何保費逾期繳交或未付款，保單會進行保費假期。於保費假期期間，一切相關費用將持續於戶口價值內扣除。當保單戶口的結存低於零時，保單將自動終止。如保單被自動終止，保單將會變成毫無價值及保單的受保人將會失去保單的保險保障。

2.4 非保證權益部份的陳述 (只適用於附有非保證權益的計劃)

- 有投資成份的保險產品[投資決定及風險由保險公司承擔] (適用於分紅保單)
  對於分紅型傳統保險計劃，產品刊物所說明可適用於保險計劃之非保證部份 (包括但不限於累積利息、紅利及獎賞) 為非保證的，列明數值只作說明之用。保險公司有絕對酌情權不時釐定此等數值，其數值是基於多種因素包括但不限於市場狀況、投資前景、保單續保率、索償經驗及保險公司之投資回報來釐定。此等數值亦非對保單於未來之表現作出的預測或保證。在保單有效期內，此等數值可以變更。因此，實際派發之非保證部份或會低於或高過所示的數值。將來實際所得權益及/或回報，可能低於或高於現時列出的權益及/或回報。若閣下選擇提取保單的非保證部份 (包括但不限於累積利息、紅利及獎賞) ，保單的累積權益及/或非保證回報將會相應調低或低於列明數值。

- 有投資成份的保險產品[投資決定及風險由保險公司承擔] (適用於萬用壽險計劃)
  對於萬用壽險計劃，產品刊物所說明可適用於保險計劃之非保證部份 (包括但不限於派息率及利息) 為非保證的，列明數值只作說明之用。保險公司有絕對酌情權不時釐定此等數值，其數值是基於多種因素包括但不限於市場狀況、投資前景、保單續保率、索償經驗及保險公司之投資回報來釐定。此等數值亦非對保單於未來之表現作出的預測或保證。在保單有效期內，此等數值可以變更。因此，實際派發之非保證部份或會低於或高過所示的數值。將來實際所得權益及/或回報，可能低於或高於現時列出的權益及/或回報。若閣下選擇提取保單的非保證部份 (包括但不限於派發利息及獎賞) ，保單的累積權益及/或非保證回報將會相應調低或低於列明數值。

2.5 保險計劃的產品單張及保單條款

- 本計劃的產品單張只供參考之用，有關本計劃之詳盡條款及細則與所有不保之事項，概以本計劃之保險合約條款及細則為準。如欲參閱保險合約條款及細則，可向保險公司索取。
- 本計劃的保單條款及產品單張由保險公司發行。保險公司對保單條款及產品單張所載資料承擔一切責任。
- 本計劃的產品單張或其他有關本計劃的產品文件只限在香港特別行政區派發，並不能詮釋為在香港特別行政區境外提供或出售或游說購買保險公司的產品。本計劃只限在香港特別行政區境內範圍銷售及辦理投保手續。
- 本計劃的保單受香港特別行政區的法律所規管。
- 保險公司的保單條款及產品單張的中英文版本如有歧異，以英文版本為準。

2.6 費用及收費

本計劃是一項保險產品，支付的部分保費會用作支付保險和相關費用。

人壽保險費用成本及 / 或保單相關費用已包括在本計劃的所需繳付保費之內，儘管本計劃的產品刊物及/或本計劃的《保險利益說明》沒有《費用與收費表》/費用與收費部份或沒有保費以外之額外收費，這既不代表閣下無需承擔任何費用與收費，也不代表本計劃沒有任何費用與收費。如本計劃的產品刊物及/或本計劃的《保險利益說明》設有《費用與收費表》/費用與收費部份 (如萬用壽險計劃)，閣下在辦理投保申請前應詳細閱讀及清楚了解每一收費項目的內容。

2.7 不受存款保障計劃所保障

本計劃並非銀行存款或定期存款，本計劃及本計劃之所有繳付保費不受香港特別行政區存款保障計劃所保障。

2.8 核保及理賠決定由保險公司作出

所有核保審核及理賠決定均取決於保險公司，保險公司根據投保人及被保人於投保時所提供的資料而決定是否接受有關投保申請。保險公司有權決定是否接納/拒絕任何投保申請並可以不接受閣下的投保申請而毋須給予任何理由。

2.9 保單貸款

如人壽保單具備現金價值，保單權益人可向保險公司申請保單貸款。所有保單貸款均附帶利息，利息按保險公司不時採用的利率計算。保單貸款及累計應付利息成為保單負債的一部份。當保單之總保單負債金額相等或超過現金價值時，保單將會被終止，受保人的人壽保障將會被終止及保單會變成毫無價值。

2.10 佣金披露

保險公司會向銀行就銷售此計劃提供佣金及業績獎金，而銀行目前所採用之銷售員工花紅或獎勵金制度，已包含員工多方面之表現，並非只著重銷售金額。銷售員工所獲的花紅、獎勵金或酬金並非單獨或直接按銷售員工的銷售表現或對銀行的營利貢獻度直接計算。

2.11 稅務申報及金融罪行

就閣下及閣下的保單，保險公司對香港及外地之法律或監管機構及政府或稅務機關負有某些責任，而保險公司可不時就該等責任要求您提供相關資料。此外，閣下應就您的稅務責任尋求獨立專業意見。

第3部份: 冷靜期權利的披露

3.1「冷靜期」

「冷靜期」的時段為保單交付給閣下或閣下的代表或將《通知書》發予閣下或閣下的代表後起計的21天，以較先者為準。有關《通知書》必須通知閣下並說明保單已經可以領取和「冷靜期」的屆滿日。

3.2 「冷靜期」權利

如閣下對保單不滿意，則在閣下未曾於保單下作出過任何索償的前提下，閣下有權在「冷靜期」內以書面要求取消保單及取回所有已繳交的保費及保費徵費(如有)。除了「非投資相連整付保費」保單外，所有「非投資相連」的保單，均可獲得退還全數已繳保費及保費徵費(如有)。但凡是「非投資相連整付保費」保單，保險公司於退還保費時，有權在已繳保費中扣除「市值調整」。冷靜期結束後，若閣下在保單期滿期前取消保單，可取回的金額可能少於閣下已繳付的保費總額。

3.3 「冷靜期」退保

如閣下需要在「冷靜期」內取消保單，閣下必須確保保險公司在閣下保單的「冷靜期」屆滿日或之前直接收到附有閣下親筆簽署的書面通知。

保險公司辦事處地址 : 香港中環德輔道中308號富衛金融中心1樓

(Applicable to Bank of Communications (Hong Kong) Limited)

(The Disclosures are written in Chinese and English. In case of discrepancy, the English version shall prevail.)

Disclosure of Important Information to Life Insurance Customers

Part 1 : Definitions and Interpretation

In the Disclosures stated below:

- The “Bank” means Bank of Communications (Hong Kong) Limited
- “Insurance Company” means FWD Life Insurance Company (Bermuda) Limited.
- The “Plan” means the insurance plan in the product brochure.
- “Insurance Application” means the insurance application with the application number
- "I/Applicant" means the applicant listed in the Insurance Application
- "Insured" means the insured person listed in the Insurance Application

Part 2 : Disclosure of Important Information to Applicant

2.1 Relationship between the Bank and Insurance Company

- The Bank is an appointed insurance agent of Insurance Company. The Bank is responsible for the distribution and selling of the Plan which is underwritten by Insurance Company and assist you to conduct the Insurance Application procedures for the Plan. The Plan is underwritten by Insurance Company. Insurance Company is authorized and regulated by Insurance Authority. The Plan is a product of Insurance Company but not the Bank. Insurance Company is solely responsible for all features, policy approval, coverage and claims under the Plan. All benefits, rights and claims related to the policy of the Plan, the policyholder or beneficiary should enquire or recourse Insurance Company.
- In respect of an eligible dispute (as defined in the Terms of Reference for the Financial Dispute Resolution Centre in relation to the Financial Dispute Resolution Scheme) arising between the Bank and the customer out of the selling process or processing of the related transaction, the Bank is required to enter into a Financial Dispute Resolution Scheme process with the customer; however any dispute over the contractual terms of the product should be resolved between directly the insurance company and the customer.

2.2 Risk disclosures

Key risks associated with the Plan including but not limited to,

- Credit Risk

  Application of the Plan and all benefits payable under the Plan are subject to the credit risk of Insurance Company. All premiums you paid under the Plan are part of assets of Insurance Company. You do not have any rights or ownership over these assets. Your recourse is against Insurance Company only.
- Liquidity Risk

  The Plan is a product under the type of non-linked long term insurance. The policy of long term insurance will be made for certain determined term of years starting from the policy effect to the policy mature. The policy term could be few years, over ten years or a lifelong period of the Insured. Some of long term insurance policies contain policy value under the policy account (including but not limited to endowment insurance, whole life insurance or annuity, etc.), if you surrender your policy in the early policy years or before the end of the policy term, the amount you get back may be considerably less than the total premium you have paid. Application of the Plan may constitute the liquidity risk to your financial condition. You need to bear the liquidity risk associated with the Plan.
- Exchange Rate & Currency Risk (Applicable to the plan with policy currency denominated in RMB or to those policies with policy currency denominated in foreign currency as selected)
  - Application of plan with policy currency denominated in RMB or the policy with policy currency denominated in foreign currency is subject to exchange rate and currency risk. Exchange rate of RMB against Hong Kong Dollar ("HKD") and exchange rate of any foreign currency against HKD may fall as well as rise.
  - If you choose to pay the premium(s) in HKD, you must pay the premium(s) based on a market-based currency exchange rate of HKD to RMB (applicable to the policy currency denominated in RMB) or a market-based currency exchange rate of HKD to the selected foreign currency (applicable to the policy currency denominated in foreign currency) which is solely determined by Insurance Company from time to time. Any fluctuations in the exchange rate of HKD to RMB, as well as in the exchange rate of HKD to the foreign currency will have a direct impact on the amount of premium paid in HKD. If the RMB or the selected foreign currency appreciates after the Policy is issued due to exchange rate fluctuation, the premium payable later will be higher than the initial premium when calculated in HKD.
  - All Benefits payable (including refund of premium etc.) will be settled in RMB or in foreign currency as selected. For the policy with policy currency denominated in RMB, if you choose to receive any benefits under the Plan in HKD, the amount payable will be the HKD equivalent of the RMB based on a market-based currency exchange rate of HKD to RMB, as solely determined by Insurance Company from time to time. For the policy with policy currency denominated in foreign currency, if you choose to receive any benefits under the Plan in HKD, the amount payable will be the HKD equivalent of the selected foreign currency based on a market-based currency exchange rate of HKD to such foreign currency, as solely determined by Insurance Company from time to time. Any fluctuations in the exchange rate of HKD to RMB, as well as in the exchange rate of HKD to the foreign currency will have a direct impact on the value of your benefit(s) as calculated in HKD and if the RMB or the selected foreign currency depreciates substantially against the HKD upon a benefit(s) becoming payable, you will lose a substantial portion of the benefit(s) in HKD terms.
  - If the premium(s) and/ or benefit(s) under the Plan with policy currency denominated in RMB cannot be paid in RMB or in HKD, the policy with policy currency denominated in foreign currency cannot be paid in selected foreign currency or in HKD either of a change in regulation(s) or for such other reasons as Insurance Company may solely determine, Insurance Company shall, based on such terms as it deems just and proper, at its sole discretion determine the currency, the currency exchange rate and the manner of calculating the premium(s) receivable, the benefit(s) payable and the premium refundable under the Plan.
  - RMB is currently not freely convertible. Conversion of RMB or provision of RMB services through banks in Hong Kong is subject to relevant RMB policies, other restriction and regulatory requirements in Hong Kong. No prior notice will be given for any changes which may be made from time to time.
- Market and Interest Rate Risk (Applicable to the Plan with guaranteed return and/or non-guaranteed return)

  Market and interest rate risk in relation to the guaranteed return of the life insurance policy (e.g. Cash Value) is borne by Insurance Company. Market fluctuation and change in interest rate will not affect the guaranteed return part of the policy. Non-guaranteed return part (e.g. Policy Dividends) is subject to market and interest rate risk and which is borne by the policyholders. Actual amount of the non-guaranteed return paid by Insurance Company and the determination of the interest rate for policy dividend accumulation made by Insurance Company may be varied due to market and

interest rate risk. You need to bear the market and interest rate risk associated with non-guaranteed return of the Plan.

- Inflation Risk

  Cost of living is likely to be higher in the future than it is today due to inflation, therefore you may receive less from the policy in real term in the future even if the Insurance Company meets all of its contractual obligations.

2.3 The circumstances and consequences of late payments or non-payments of premiums

- Insurance product with savings element [with savings but without investment element] (Applicable to non-participating policy) or Insurance product with investment element [Investment decisions and risks borne by insurance company] (Applicable to participating policy)

  Should there is any late payment or non-payment of premiums, the policy will be subject to automatic premium loan (if applicable) or termination of the policy. During automatic premium loan, Insurance Company shall automatically advance the premium due as a loan. The policy shall automatically be terminated if at any time sums loaned and accrued interest equal or exceed the accumulated cash value under the policy. If the policy is terminated automatically, the policy will become valueless and the Insured of the policy will lose his/her insurance protection under the policy.

- Insurance product with investment element [Investment decisions and risks borne by insurance company] (Applicable to Universal Life Insurance Plan)

  Should there is any late payment or non-payment of premiums, the policy will exercise premium holiday. During Premium Holiday, all relevant charges will be continuing deducted from the Policy Account. When the Account Value is equal to or less than zero, this Policy shall automatically be terminated. If the policy is terminated automatically, the policy will become valueless and the Insured of the policy will lose his/her insurance protection under the policy.

2.4 The description of non-guaranteed items (Applicable to the plan with non-guaranteed benefits only)

- Insurance product with investment element [Investment decisions and risks borne by insurance company] (Applicable to participating policy)

  For traditional participating insurance plans, any illustrated values of non-guaranteed items that are applicable to this plan (including but not limited to accumulated interest rates, dividends and bonuses) are not guaranteed and are for illustrative purposes only. It is determined by Insurance Company from time to time at its absolute discretion based on a series of factors including but not limited to market conditions, investment outlook, policy persistency, claims experience, and Insurance Company's investment return. It is neither an estimate nor guarantee of the Policy performance in the future. The non-guaranteed items are subject to change during the term of the policy. The actual amounts of the non-guaranteed items may be lower than or higher than those illustrated. The actual future amounts of benefits and/or returns may be lower than or higher than the currently quoted benefits and/or returns. If you choose to withdraw the non-guaranteed items (including but not limited to the accumulated dividends and bonuses) of the policy, the accumulated benefit and/or non-guaranteed returns will be reduced accordingly or lower than the illustrated values.

- Insurance product with investment element [Investment decisions and risks borne by insurance company] (Applicable to Universal Life Insurance Plan)

  Any illustrated values of non-guaranteed items that are applicable to this plan (including but not limited to bonuses, crediting rates and interest) are not guaranteed and are for illustrative purposes only. It is determined by Insurance Company from time to time at its absolute discretion based on a series of factors including but not limited to market conditions, investment outlook, policy persistency, claims experience, and Insurance Company's investment return. It is neither an estimate nor guarantee of the Policy performance in the future. The non-guaranteed items are subject to change during the term of the policy. The actual amounts of the non-guaranteed items may be lower than or higher than those illustrated. The actual future amounts of benefits and/or returns may be lower than or higher than the currently quoted benefits and/or returns. If you choose to withdraw the non-guaranteed items (including but not limited to the accumulated dividends and bonuses) of the policy, the accumulated benefit and/or non-guaranteed returns will be reduced accordingly or lower than the illustrated values.

2.5 The information contained in the product brochure and policy provision of insurance plan

- The product brochure of the Plan is for reference only. For the exact terms and conditions and the full list of exclusions of the Plan, you should refer to the policy provisions of the Plan and the policy provisions shall prevail. In case you want to read the terms and conditions of the policy provisions before application, you can obtain a copy from Insurance Company.
- The policy provisions and product brochure of the Plan are issued by Insurance Company. Insurance Company accepts full responsibility for accuracy of the information contained in the policy provisions and product brochure.
- The product brochure and any product materials of the Plan are intended to be distributed in the Hong Kong Special Administrative Region (HKSAR) only and shall not be construed as an offer to sell or solicitation to buy or provision of any insurance products of Insurance Company outside HKSAR. All selling and application procedures of the Plan must be conducted and completed in the HKSAR.
- The law governing the policy of the Plan is the laws of Hong Kong Special Administrative Region.
- For the policy provisions and product brochure which are issued by Insurance Company, in the event of discrepancies between the English and Chinese versions, the English version shall prevail.

2.6 Fees and Charges

The Plan is an insurance product. Part of the premiums will pay for the insurance and related costs.

The costs of insurance and the related costs of the policy are included in the premium paid under the Plan despite the product brochure and/or the illustration documents of the Plan have no schedule/section of fees and charges or no additional charge apart from the premium. Neither of none of fees and charges is under the Plan nor to be borne by you. If the product brochure contains the schedule/section of fees and charges(such as universal life insurance plan), you should read it thoughtfully to ensure you understand each fee & charge item before making the Insurance Application.

2.7 No coverage under Deposit Protection Scheme

The plan is not the savings deposit or time deposit of the Bank. The Plan and all premiums paid under the Plan is not protected under the Deposit Protection Scheme in Hong Kong Special Administrative Region.

2.8 Underwriting and claims decision are made by Insurance Company

All underwriting and claims decisions are made by Insurance Company. Insurance Company is based on the information provided by the applicant and the Insured upon the Insurance Application to decide whether to accept or decline the application. The Insurance Company reserves the right to accept/reject any Insurance Application and can decline your Insurance Application without giving any reason.

2.9 Policy Loan

If the life insurance policy contains cash value, policyholder can apply for policy loan from Insurance Company. Interest charge will be imposed under the policy loans. The applicable interest rate is determined by Insurance Company and it is subject to change from time to time. Policy loan together with its accumulated interest will form parts of policy indebtedness. When the amount of policy indebtedness is equal to or larger than cash value of the policy, the policy will be terminated automatically. The policy will become valueless and the Insured of the policy will lose his/her insurance protection.

2.10 Commission Disclosure

Insurance Company will provide commission and sales bonus to the Bank subject to the sales of this Plan. The bonuses, incentives or remuneration packages which are provided by the Bank to their sales staffs will consider the staff's overall performance including various areas, not only determined by their sales performance or contribution on revenue to the Bank.

2.11 Tax reporting and financial crime

Insurance Company has certain obligations to Hong Kong and foreign legal or regulatory bodies and government or tax authorities regarding you and your policy and the Insurance Company may from time to time request information from you in relation to these obligations. Between, you are recommended to seek your own independent professional advice in your tax liabilities.

Part 3: Disclosure of Cooling-off Rights

3.1 "Cooling-off Period"

The Cooling-off Period is 21 days after the delivery of the policy or issue of a Notice to you or your representative, whichever is the earlier. The Notice should inform you that the policy is available for collection and expiry date of the Cooling-off Period.

3.2 "Cooling-off Rights"

If you are not satisfied with the policy, you have the right to cancel it within the Cooling-off Period by giving a written notice and obtain a refund of any premium paid and any insurance levy paid provided that you have not made any claims under the policy. For all non-linked policies other than non-linked single premium policies, the refund shall be 100% of the premiums paid and any insurance levy paid. For all non-linked single premium life insurance policies, Insurance Company will have the right to apply a "market value adjustment" (MVA) to the refund of premiums. After the expiration of the cooling off period, if you cancel the policy before the end of the term, the amount you can get back may be less than the total premium you have paid.

3.3 Surrender within "Cooling-off Period"

If you want to cancel the policy within the Cooling-off Period, the written notice with your signature must be given to the office of Insurance Company and you must ensure that such notice must be received by Insurance Company on or before the expiry date of the Cooling-off Period.

The office address of Insurance Company: 1/F., FWD Financial Centre, 308 Des Voeux Road Central, Hong Kong

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Crisis XDefender 危疾全守衛 -
THE ONE cierge

ONE TEAM HEALTH MANAGEMENT

臻一優才醫護管理團隊

注意事項 Note:

- 在接受任何醫療服務前，請先向醫生尋求獨立意見以確保您的身體狀況適合接受有關醫療服務。此外，所有互康及其醫療網絡團隊的醫生均為獨立之專業醫護人員，而非富衛之僱員或代表。富衛並不會就他們所提供的醫療服務或治療之行為、疏忽或遺漏承擔責任。
- 您謹同意富衛、互康及/或其醫療網絡團隊就為您提供的服務所得的個人資料記錄、分享、使用和歸檔。此資料亦會被用作以培訓及質量保證的用途。您同意若您不提供相關的個人資料，可能導致該服務提供者無法提供有關的服務給您。
- Please seek doctor's individual advice on appropriateness of any medical service to be provided. Doctors of HMG and its healthcare network team are all individual healthcare personnel instead of employees or representatives of FWD. FWD shall not be responsible for any act, negligence or omission of medical service or treatment on the part of them.
- You hereby consent to FWD, HMG and its healthcare network team, recording, sharing, using and archiving your personal data in pursuance of the services being offered to you as well as for their training and quality assurance purposes. You agree that failure to provide the relevant personal data may result in the said service providers being unable to provide the relevant services to you.

註 Remarks:

1. 臻一由互康集團(「互康」)及其醫療網絡團隊提供。臻一並非保單條款之一部分或保障內容，並只適用於危疾全守衛(「本計劃」)。富衛人壽保險(百慕達)有限公司(「富衛」)有權隨時撤銷或調整臻一而無需另行通知，並保留絕對決定權。富衛亦將不會就互康及/或其醫療網絡團隊的行為、疏忽或失誤負上任何責任。臻一只適用於香港區域。
2. 此熱線由富衛及互康共同管理。互康將會負責星期一至日上午8時正至下午10時正的預約電話，其餘時間將由富衛負責。請注意，此熱線只供非緊急預約醫生之用，並非作緊急用途。而內地免費專線只於星期一至日上午8時正至下午10時正作出支援。

1. THE ONEcierge, provided by HealthMutual Group Limited ("HMG") and its healthcare network team, is not a part of the Policy or benefit item under the Policy Provisions and only applicable to Crisis XDefender ("the Plan"). FWD Life Insurance Company (Bermuda) Limited ("FWD") reserves the right to terminate or vary THE ONEcierge in its sole discretion without further notice. FWD shall not be responsible for any act, negligence or failure to act on the part of HMG and its healthcare network team. THE ONEcierge is only available in Hong Kong region.
2. This hotline is cooperated by FWD & HMG. HMG will handle the reservation calls from 8:00a.m. to 10:00p.m., Monday to Sunday and FWD will be responsible for any calls afterwards. Please note that this hotline is for non-emergent reservation of doctor consultation instead of for emergency purpose. The Toll-free number for Mainland operates only from 8:00 am to 10:00 p.m., Monday to Sunday.

FWD 富衛

一份保障一個團隊
一站式貴賓服務
ONE PLAN ONE TEAM
ONE STOP SOLUTION

每個人也希望身邊有一個值得信賴的伙伴，即使遇上健康問題，也可以藉此專心休養及享受人生！富衛作為您信賴的伙伴，除為您提供全面的醫療保障外，更度身訂造為您提供專屬的醫護服務：危疾全守衛 - 臻一優才醫護管理團隊(「臻一」)[1]，由專業醫療管理團隊給您禮賓式待遇，於您最需要時提供周全妥貼的一站式醫護服務安排，打點康復途上的各項細節，真正化繁為簡。

Everyone would like to be along with a reliable partner, so as to focus on their recovery and enjoy life even when facing any health problems. As your trusted partner, in addition to providing you with comprehensive medical protection, FWD also customises dedicated health services especially for your needs. Crisis XDefender - THE ONEcierge One Team Health Management ("THE ONEcierge")[1] gives you priority treatment from a professional health management team with a one stop approach, helping you when you needed help most. You can relax with ease knowing FWD is there to take care of all aspects of your health.

專科醫療團隊為您提供
優質醫療服務
PROFESSIONAL & EXPERIENCED
MEDICAL TEAM AS YOUR PARTNER

一個專業的醫療管理團隊，可助您快捷準確地獲得最合適的醫療意見，以及得到最佳治療。因此，臻一為您提供專屬的專科醫療網絡團隊，讓您選擇最合適的醫生，接受最合適的治療。有了這個專業醫療專家作後盾，即使不幸患上任何疾病，您也可從容面對。

A professional medical service provider is undoubtedly your best assurance to receiving prompt & suitable medical advice and treatment. That's why THE ONEcierge provides you with a dedicated network of specialists so that you could receive the most suitable treatment from the best-suited doctor. With this professional team of experts as your guardian angel, you can be hassle free even when facing with any illnesses or diseases.

優越代辦 住院手續
PREMIER HOSPITALISATION ARRANGEMENT

稱得上尊尚服務，就必定以您為尊。若臻一之主診醫生建議您需要住院，專科醫療網絡團隊便會安排您儘快入院及儘早得到治療，讓您繼續享受人生。

THE ONEcierge always puts your interest first. Should you require hospitalisation as diagnosed by your consulting doctor of THE ONEcierge, the team of specialists will arrange you to admit to hospital and receive treatment promptly. You can then continue to live your life.

優質高效 理賠程序
EFFICIENT AND SEAMLESS CLAIMS RESOLUTION

我們的團隊將協助您向富衛申請安排優質高效理賠程序，讓您可交託平常理賠的手續給予我們的團隊。

The team of specialists will assist you to apply for Efficient and Seamless Claims Resolution arrangement to FWD and so you can leave the formalities of claims submission to our team.

從此，就由臻一作為保障您的健康伙伴！
From now on, let THE ONEcierge be your partner in safeguarding your health!

危疾全守衛 Crisis XDefender -
臻一優才醫護管理團隊熱線
THE ONEcierge One Team Health Management Hotline:
香港 Hong Kong：(852) 8120 9066
內地免費專線 Toll-free number for Mainland：400 9303078
24小時全天候支援[2] 24-hour full support[2]

如有保單資料查詢，請致電您的理財顧問或客戶服務熱線3123 3123。
For any enquiries about policy information, please contact your advisors or our customer service hotline 3123 3123

以上資料只供參考及旨在描述臻一的主要特點，並非本計劃保單內容。有關本計劃條款細則的詳細資料，請參閱本計劃之保單條款。本單張中英對照，如有任何歧異，概以英文原義為準。
The above information is for reference only and is indicative of the key features of THE ONEcierge instead of the benefit of the Plan. For a complete explanation of the terms and conditions of the Plan, please refer to their Policy Provisions. In the event of any discrepancy between the English and Chinese version of this leaflet, the English version shall prevail.

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